

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10/588542

FILING DATE

08/07/06

APPLICANT(S)

03/17/09

CLAIMS

03/17/09

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51	1					
2	1						52		0				
3	1						53						
4	1						54						
5	1						55						
6		1					56						
7		3					57						
8		3					58						
9	1						59						
10	1						60						
11		1					61						
12		3					62						
13		3					63						
14	1						64						
15		1					65						
16	1						66						
17	1						67						
18		1					68						
19		3					69						
20		3					70						
21	1						71						
22	1						72						
23		1					73						
24		3					74						
25		3					75						
26	1						76						
27	1						77						
28		1					78						
29		3					79						
30		3					80						
31	1						81						
32	1						82						
33		1					83						
34		3					84						
35		3					85						
36	1						86						
37		0					87						
38	1						88						
39		0					89						
40	1						90						
41		0					91						
42	1						92						
43		0					93						
44	1						94						
45		0					95						
46		0					96						
47	1						97						
48		0					98						
49		0					99						
50		0					100						
TOTAL IND.		↓		↓		↓	TOTAL IND.	24	↓	25	↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.	32	←	45	←		←
TOTAL CLAIMS							TOTAL CLAIMS	76		70			

Best Available Copy